

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application No.	10/552,049
	Filing Date	October 4, 2005
	First Named Inventor	Andrew T. Yule
	Group Art Unit	2622
	Examiner Name	Justin P. Misleh
	Attorney Docket Number	5926P074

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with Customer Number: **08791**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: **08791**

OR

☐ Firm or Individual Name

Address

Address

City State Zip Code

Country Telephone Fax

I am the:

☐ Applicant.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under of 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name *Stefan Franco*

Signature *[Signature]*

Date *10-09-2005*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☒ Total of 2 forms are submitted.